

APPLICATION DATA SHEET

Application Information	10/628,128
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	
Number of CD disks::	
Number of copies of CDs::	
Sequence submission?::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	METHODS FOR SINGLE QUBIT GATE TELEPORTATION
Attorney Docket Number::	11090-013-999
Request for Early Publication?::	
Request for Non-Publication?::	
Suggested Drawing Figure::	
Total Drawing Sheets::	
Small Entity?::	
Latin name::	
Variety denomination name::	
Petition included?::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	
Inventor Information	
Inventor Authority Type::	Inventor
Primary Citizenship Country::	China
Status::	Full Capacity

Attorney Docket No. 11090-013-999
U.S. Serial No: 10/628,128

Given Name:: Lian-Ao
Middle Name::
Family Name:: Wu
Name Suffix::
City of Residence:: Toronto
State or Prov. of Residence:: Ontario
Country of Residence:: Canada
Street:: 303-36 Thorncliffe Park Drive
City:: Toronto
State or Province:: Ontario
Country:: Canada
Postal or Zip Code:: M4H 1J8

Inventor Authority Type:: Inventor
Primary Citizenship Country:: Israel/The Netherlands
Status:: Full Capacity

Given Name:: Daniel
Middle Name::
Family Name:: Lidar
Name Suffix::
City of Residence:: Toronto
State or Prov. of Residence:: Ontario
Country of Residence:: Canada
Street:: 22 Wroxeter Ave.
City:: Toronto
State or Province:: Ontario
Country:: Canada
Postal or Zip Code:: M4K 1J6

Inventor Information

Inventor Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity

Given Name:: Blais
Middle Name::
Family Name:: Alexandre
Name Suffix::
City of Residence:: Sherbrooke
State or Prov. of Residence:: Quebec
Country of Residence:: Canada
Street:: 1413 Laflèche
City: Sherbrooke
State or Province:: Quebec
Postal or Zip Code:: J1K 2Y9

Correspondence Information

Correspondence Customer Number:: 20583

Domestic Priority Information

Application:: **Continuity Type::** **Parent Application::** **Parent Filing Date::**

Assignee Information

Assignee name::
Street::
City::
State or Province::
Country::
Postal or Zip Code::